Virginia Nonresident Income Tax Return 2004 Due May 2, 2005

	Amended Return - Check if Result of NOL Fixed Date Conformity		Part-Year Resident: If you or your spouse moved into or out of Virg	ginia in 2004, you may have t	o use Form	760PY.		
			n - Your First Name MI Last Name	. Suffix Your	Social Security	Number		
			Spouse's First Name .MI . Last Name .	. Suffix Spot	Spouse's Social Security Number			
	Modifications ☐ Overseas on Due Date		Present Home Address (Number and Street, or Rural Route)	State	State of Residence			
	☐ Qualifying Farmer, Fisherman or Merchant Seaman ☐ Name(s) and Address Different Than Shown on 2003		City, Town, or Post Office, and State	ZIP Code Loca	Locality Code from Instructions			
			Important - Name of Virginia City or County in Which Principal Place of Business, Employment or Income Source is Located City or County					
	Virginia Re	turri		EXEMPTIONS (Enter Number)				
	STEP 1 Check		FILING STATUS (CHECK ONLY ONE) You 65 or over	Blind Dependents Exemptions	E	nter on Line 12 below.		
	your	1	☐ Single (Claiming federal Head of Household? YES ☐) 1 +	+ = =	X \$800 =	00		
	Filing Status	2	Married, Filing Joint Return (BOTH must have Virginia source income) 2 + +	+ = =	X \$800 =	00		
	Enter	3	Married, Spouse Has No Income From Any	· +	Λ φουυ -	00		
	your Exemp-	Ü	Source (Enter spouse's SSN above) Spouse's full name +	+ = =	X \$800 =	00		
	tions	4	Married, Filing Separate Return					
			(Enter spouse's SSN above)	+ = ;	X \$800 =	00		
9-R here.			Spouse's full name					
		5	Dependent on Another's Return (See the instructions for Line 11.)			Enter whole dollars only.		
	STEP 2		ADJUSTED GROSS INCOME from your federal return (not federal to	·		00		
1099-R	Do you need		Additions from Line 32, Part I, on page 2			00		
W-2G and	Do you need to file? See Line 10 Instructions. →		Subtotal (Add Line 6 and Line 7)			00		
			Subtractions from Line 40 , Part II, on page 2			00		
			VIRGINIAADJUSTED GROSS INCOME (Subtract Line 9 from Line 8)			00		
	STEP 3 Compute Your Virginia		Standard Deduction from Line 41, Part III, OR Itemized Deductions from	. •		00		
W-2			Enter the Exemption Amount computed above on Line 1, 2, 3 or 4			00		
us			Virginia Child and Dependent Care Expenses Deduction (See instructio			00		
orn			Subtotal (Add Lines 11, 12 and 13)			00		
Staple Forms W-2,	Taxable Income		Taxable income computed as a resident (Subtract Line 14 from Line 10					
tapl	- Income		Percentage from Line 59, Part V, on page 2 [Enter to one decimal pl			00		
S			NONRESIDENT TAXABLE INCOME (Multiply Line 15 by percentage on L Income Tax: From Tax Table or Tax Rate Schedule			00		
	STEP 4 Compute Your Tax,		Payments: (a) Your Virginia income tax withheld (Attach Forms W-2, W					
oxdot		10	(b) Spouse's Virginia income tax withheld (Attach Forms W-	,				
			(c) 2004 estimated tax payments (Include credit from 2003)	•				
	Payments		(d) Extension payment - Form 760E		() -	00		
	and Credits		Credits: (e) Tax Credit for Low-Income Individuals from Schedule NP		` ,	00		
	Credits		(f) Credit for tax paid to another state from Schedule NPY, F		. ,			
			(g) Credits from attached Schedule CR. If claiming Political C also check box. (See instructions)		□(a) •	00		
٠ <u>.</u>			(h) Check box if reporting Coalfield Employment Enhancement		(0)			
heı		20	TOTAL PAYMENTS AND CREDITS [add Lines 19(a) through (g)]			00		
order here.	STEP 5	21	If Line 18 is larger than Line 20, enter the difference. This is the INCOMI	E TAX YOU OWE. Skip to Lin	e 23 21	00		
	Compute		If Line 20 is larger than Line 18, enter the difference. This is the OVERF			00		
Staple check or money	Amount	23	Addition to tax, penalty and interest from Schedule NPY, Part IV, Line 4		23 •	00		
	You Owe or		Amount of overpayment on Line 22 to be CREDITED TO 2005 ESTIMAT			00		
	Your		Contributions from Schedule NPY, Part V, Line 7.			00		
	Refund		Add Line 23, Line 24 and Line 25		26	00		
		27	If you owe tax on Line 21, add Lines 21 and 26 - OR - If Line 22 is an clarger than Line 22, enter the difference. This is the AMOUNT YOU OW		27 🛋	00		
ole	Be Sure To		Check here if cre	edit card payment has been r	nade \square			
Stap	Sign Your Return On Page	28	If Line 22 is larger than Line 26, subtract Line 26 from Line 22. This is the a	amount to be REFUNDED TO	YOU 28 ●	00		
	2	For	Local Use LTD	For Office Use		Coding		

FOF	RM 7	63 (2004)	Name			SSN					Page 2
			DERAL ADJUSTED GRO		o toy but n	at atata tay			20		00
		ŭ	of other states, exempt fr		-						00
			eral adjusted gross incom			•	,				00
			nformity additions (See in dd Lines 29, 30 and 31). E							-	00
			FROM FEDERAL ADJUS			ige i			52		
			instructions - changes		JIVIE (FAGI)						
I	Enter t	the Adjusted Fed	leral Adjusted Gross Inco	me from Age Ded	uction Work	Sheet, Line 8, if	applicabl	e			
	For Fili	ing Status 4, ent	er spouse's birth date		Col. A	- Spouse	Co	ol. B - You			
(r Filing Statuses 2 and 3 ly one qualifies for an age		•	Day - Year	Month -	- Day - Yo	ear		
((b) Ent	ter Age Deduction	on (See instructions.)	(t	0)	00			00		
((c) Add	d amounts on lin	e 33(b) above and enter t	he total on this lin	ie				33	•	00
34	State i	ncome tax refun	d or overpayment credit i	reported as incom	ie on your fe	ederal return			34		00
35 I	ncome	e on obligations	or securities of the U.S. e	exempt from state	income taxe	es, but not from fe	ederal ta	x	35	•	00
			valent Tier 1 Railroad Retire				your fede	ral return	36	•	00
			ted as wages (or payme	nts in lieu of wage	es) on acco	unt of ☐ Spo			37		
		nent and total dis	sability I Age Deduction on Lir	o 22 and the di	oobility ou				37		00
			nformity subtractions (Se		Sability Su				38		00
	•		efer to the instruction boo	,	action Code				30	-	00
39 (Other .	Subtractions - re		inter 2 digit code i		S			● 39a	•	00
			39b E	inter 2 digit code i	n box —				• 39b	•	00
				inter 2 digit code i			_		● 39c	•	00
40	TOTAL	SUBTRACTION	NS (Add Lines 33 thru 39c	ū		n page 1			40		00
			DUCTION (Must be used a	<u>, </u>		<u> </u>					
			2 = \$5,000; 3 or 4 = \$5,000; 3 or								00
PAR1	IV - I	TEMIZED DEDU	JCTIONS (If you itemized	deductions on yo	our federal re	eturn, see page 1	8 of the	instructio	ns.)		
42	Total fe	ederal itemized o	deductions						42		00
43	State a	nd local income t	axes claimed on Schedule	A (See instructions	if your feder	al itemized deduct	ions were	reduced)43	•	00
44	TOTAL	VIRGINIA ITEM	IZED DEDUCTIONS (Sub	tract Line 43 from	Line 42). Er	iter here and on L	ine 11 on	page 1	44		00
PART	V - NO	ONRESIDENT A	LLOCATION PERCENTA	GE SCHEDULE (See instructi	ons)		COLUM			COLUMNB
		-	ve numbers in brackets.				45	All Sou			irginia Sources
	•		etc							00	00
							-			00	00
										00	00
		•								00	00
		ess income or lo	•• • • • • • • • • • • • • • • • • • • •				49			-	00
	•	•	pital gain distributions				50			00	00
		ŭ	odilo o o od IDA distribution							00	00
			uities and IRA distribution							00	
		-	erships, estates, trusts, S							00	00
							-			00	00
							55			00	00
		ū	of other states from Line							00	00
			s/accumulation distribution							00	00
			through 57 and enter each							00	00
1	percen	ntage to one dec	percentage - Divide Line : imal place, showing no no ne 16 on page 1	nore than 100% b	out not less	than 0%. Exampl	le: 5.4%.)		59	%
I (We)	authori	ize the Department	of Taxation to discuss this ret under penalty of law that I (we	urn with my (our) pre	parer.						
	,	Your Signature		Date	□ ch1 ''	Your Business Phone	Number		Home Pho	ne Numb	er
	,	×			Check if deceased.	• ()			• ()	
	ase		a joint return hoth must sign \	Date		1	none Numbo	r	- '	,	
0.9		Check if									
		X			deceased.	• ()					
	F	Preparer's Signature		Date		Preparer's Phone Nun	nber		Preparer	's FEIN/	PTIN/SSN
1						()					
Pren	arer's	X				/ /					
	arer's	X Firm's Name (or Yours	If Self-Employed) and Address			,					Filing Election
		X Firm's Name (or Yours	If Self-Employed) and Address			<u> </u>					Filing Election
Use	Only		If Self-Employed) and Address opy Of Your Federal	Individual Ind	come Tax	Return And A	All Othe	er Regu	ired Vi	ginia	•